

**ANNUAL REPORT  
OF THE  
COMMISSION ON MENTAL HEALTH**



**November, 2008**

# INDIANA LEGISLATIVE COUNCIL

## 2008

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# COMMISSION ON MENTAL HEALTH

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### Senators

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### Staff

Susan Kennell  
Attorney for the Commission

Bill Brumbach  
Fiscal Analyst for the Commission

A copy of this report is available on the Internet. Reports, minutes, and notices are organized by committee. This report and other documents for this Committee can be accessed from the General Assembly Homepage at <http://www.in.gov/legislative/>.

## **I. STATUTORY DIRECTIVE**

The Commission on Mental Health is established by IC 12-21-6.5 to do the following:

- (1) Study and evaluate the funding system for mental health services in Indiana.
- (2) Review and make specific recommendations regarding the provision of mental health services delivered by community providers and state operated hospitals. The review and recommendations must cover services to all age groups including children, youth, and adults.
- (3) Review and make recommendations regarding any unmet need for public supported mental health services:
  - (A) in any specific geographic area; or
  - (B) throughout Indiana.

In formulating recommendations, the commission shall consider the need, feasibility, and desirability of including additional organizations in the network of providers of mental health services.

- (4) Monitor the implementation of managed care for the mentally ill that is paid for in part or in whole by the state.
- (5) Make recommendations regarding the commission's findings to the appropriate division or department of state government.

The Commission is not required to file a final report.

## **II. SUMMARY OF WORK PROGRAM**

The Commission met the following four times during the 2008 interim: August 19, 2008, September 4, 2008, September 23, 2008, and October 21, 2008.

At the August 19, 2008, meeting, the Commission received:

- (1) an annual report on the Division of Mental Health and Addiction (DMHA);
- (2) an update on the Transformation Plan, including the financing component, the housing component, and forensic issues;
- (3) a presentation on the shortage of psychiatrists in Indiana; and
- (4) an update from the Department of Correction, including the re-entry program, medical services, and substance abuse programs; and
- (5) a report on mental health treatment in county jails.

At the September 4, 2008, meeting, the Commission:

- (1) focused on mental health issues concerning children, including reports from the DMHA, the Department of Child Services, the Department of Education, and

Riley Hospital;

- (2) received information on parity between CHIP funding and Medicaid funding for children's mental health services;
- (3) was updated on issues concerning community mental health centers;
- (4) received information on issues concerning families of individuals receiving mental health care in Indiana; and
- (5) received a report on the integration segment of the Transformation Plan.

At the September 23, 2008, meeting, the Commission:

- (1) had a discussion on licensure of addiction counselors;
- (2) received a report from the Medicaid Quality Advisory Committee;
- (3) received information from a community health center and a community mental health center about implementation of the Integration Plan;
- (4) received information on problem solving courts; and
- (5) discussed requests for legislation from the Commission.

At the October 21, 2008, meeting, the Commission received follow up information concerning topics discussed in previous presentations, including CHIP and Medicaid parity, Medicaid payments to schools, and Medicaid payment adjustments for doctors. The Commission also approved legislation.

Meeting minutes for the Commission can be accessed from the General Assembly Homepage at <http://www.in.gov/legislative/>.

### **III. Recommendations**

At the October 21, 2008, meeting, the Commission approved the following drafts or proposed legislation:

- (1) PD 3288 provides for the licensure of addiction counselors.
- (2) PD 3306 does the following:
  - Requires the Department of Correction (DOC) to adopt the same drug formulary as is used by Medicaid.
  - Requires the DOC to adopt standards for local jails to use the same drug formulary as is used by Medicaid.
  - Requires the Division of Mental Health and Addiction (DMHA) to create a forensic technical assistance center.
  - Creates the Mental Health Medicaid Quality Advisory Committee as a permanent committee to advise the Drug Utilization Review Board.
  - Provides for closing juvenile proceedings for the testimony of health care providers and certain other providers.
  - Creates a multiagency task force on workforce development issues.

- Makes a finding that the state needs one mental health facility (Evansville Children's Psychiatric) to be funded by bonding by the Indiana Finance Authority.

(3) PD 3314 - Creates the public sector psychiatry program to encourage individuals in medical residency programs to enter the area of public sector psychiatry. The draft appropriates money to the program for the second year of the biennium.

(4) PD 3312 - Creates a loan repayment program as an incentive to attract psychiatrists, psychologists, and psychiatric nurses to Indiana. The draft appropriates money for each year of the biennium.

(5) PD 3269 - Specifies that mental health services that must be covered under CHIP are the same as the services that must be covered under Medicaid.

(6) PD 3416 provides for the creation of problem solving courts, including mental health courts.

(7) Concurrent resolution 20091337.001 calls for full funding for community mental health centers to provide services to those with behavioral health and addiction issues.

(8) Concurrent resolution 20091332.001 asks that the following topics be assigned to the COMH for the 2009 interim:

- Funding streams for mental health services for the indigent and uninsured.
- Training in warning signs of mental illness in children for teachers.
- Increasing the alcoholic beverage taxes to increase funding for mental health and addictions services.
- DOC assisting those eligible for Medicaid to apply 30 days prior to release.
- Medical records following an inmate from a local jail to DOC.
- Commitment laws.